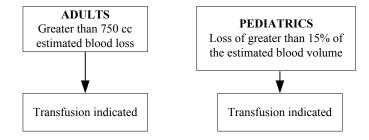
# **Red Cell Transfusion Guidelines**

Washington State Clinical Laboratory Advisory Council (CLAC) Ausut 2003

## **ADULT Hematocrit (HCT)Values**

### Greater than 27% 21 - 27% Less than 21% (Hemoglobin greater (Hemoglobin 7-9 g/dl) (Hemoglobin less than 7 g/dl) than 9 g/dl) Transfusion indicated if one or Transfusion Transfusion indicated more of the following: not indicated 1. Active bleeding 2. Falling HCT (greater than 4% decrease) within 24-hours (assess if hemodiluted result) 3. History/risk for vascular, cerebral compromise, oncology diagnosis 4. In the setting of cardiac ischemia or infarct, consider need for higher hemoglobin.

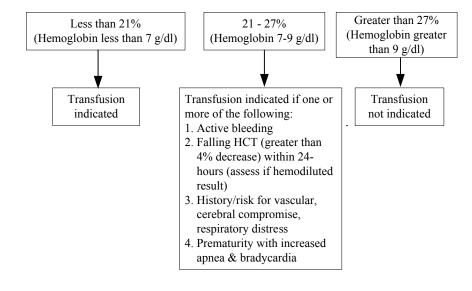
# **ACTIVE BLEEDING**



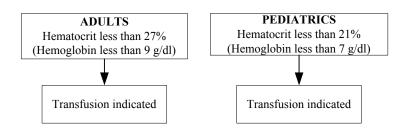
#### FOR EDUCATIONAL PURPOSES ONLY

These are guidelines only - each patient must be clinically assessed for transfusion appropriateness.

## **PEDIATRIC Hematocrit Values**



# **AUTOLOGOUS UNITS**



References: 1, Herbert PC, Wells G, Blaichman MA, Marshall J, Martin C, Pagliarello G, et al. A Multicenter, Randomized, Controlled Clinical Trial of Transfusion Requirements in Critical Care, N Eng J Med 1999 Feb 11; 340 (6): 409-17.

- 2. Goodnough LT, Anemia Transfusion and Mortality N Eng J Med 2001 OCT 25; 345:1272-1274.
- 3. Goodnough LT, Medical Progress Transfusion Medicine- First of two parts. N Eng J Med 1999 Feb 11;340:435-447. Goodnough LT, Medical Progress-Transfusion Medicine- Blood Conservation- Second of two parts. N Eng J Med 199 Feb 18; 340:525-533.
- 4. Swedish Medical Center (SMC) Blood Utilization Subcommittee; SMC Laboratory Committee, 2003.